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SERIAL NUMBER 09/685,193	FILING DATE 10/10/2000 RULE	CLASS 600	GROUP ART UNIT 3737	ATTORNEY DOCKET NO. P-9288.00
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** CONTINUING DATA ***** *WJ*** FOREIGN APPLICATIONS ***** *WJ*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 12/04/2000

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged Examiner's Signature <i>WJ</i> Initials <i>WJ</i>	MN	16	38	10

ADDRESS

27581

MEDTRONIC, INC.

710 MEDTRONIC PARKWAY NE

MS-LC340

MINNEAPOLIS , MN

55432-5604

TITLE

Heart wall ablation/mapping catheter and method

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees (Filing)
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RECEIVED 1810	No. _____ for following:	<table border="1"><tr><td><input type="checkbox"/> 1.18 Fees (Issue)</td></tr><tr><td><input type="checkbox"/> Other _____</td></tr><tr><td><input type="checkbox"/> Credit</td></tr></table>	<input type="checkbox"/> 1.18 Fees (Issue)	<input type="checkbox"/> Other _____	<input type="checkbox"/> Credit
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